

**AFFIDAVIT OF STEVEN EDELMAN, M.D.**

I, Steven Edelman, M.D., attest:

1. My name is Steven Edelman. I am a physician, Board Certified in Diabetes and in Internal Medicine.
2. I am a Professor of Medicine in the Division of Endocrinology, Diabetes and Metabolism, at the University of California San Diego, since 2001, teaching, conducting research and practicing diabetes patient care within the university and the Veterans Affairs (VA) Healthcare Systems, San Diego, CA.
3. I am Director of the Clinical Clerkship Program, University of California, San Diego and the Veterans Affairs (VA) Medical Center.
4. I am the Founder, Director, and Chairman of the Board, of-Taking Control of Your Diabetes (TCOYD) [www.tcoyd.org](http://www.tcoyd.org), a not-for-profit 501(c)(3) organization promoting patient education, motivation and self-advocacy via a number of informa-

tion portals (national conferences, publications, social media, television, and community programs), since 1995.

5. Attached hereto at Ex. A is a true and correct copy of my most recent CV, which accurately states my employment background in medicine, my education and training in medicine, a list of appointments and community service, academic honors and awards, professional associations, teaching experience, publications, and other related information regarding my medical background.

6. Because TCOYD is engaged in ongoing conferences around the United States, I give many presentations each year to people with type 1 and type 2 diabetes as well as health care professionals.

7. I am providing this affidavit about the risk of SARS-CoV-2 infection, also known as COVID-19, or the novel coronavirus, to persons with type 2 diabetes, because such persons held

within correctional settings are particularly vulnerable as a result of their incarceration.

8. Attached hereto at Ex. B is a true and correct copy of a form letter prepared and published by the American Diabetes Association (“ADA”), which addresses concerns regarding facilities that detain people with diabetes under criminal or civil law during the COVID-19 pandemic.

9. The American Diabetes Association is recognized as a global authority on diabetes, and is the author of the Standards of Care for Diabetes.

10. Consistent with the position of the ADA reflected in the form letter attached at Ex. B, I would add specifically that having Type 2 diabetes is a significant risk factor for serious complications from COVID-19, including death.

11. Vulnerability of persons with type 2 diabetes exists both because such persons are more vulnerable to contracting

COVID-19 as a result of reduced immunity derived from their type 2 diabetes, and because such persons are more likely to suffer serious and deadly consequences of COVID-19 as a result of particular co-morbidities seen in this population.

12. Although COVID-19 is novel, the medical community has been collecting and analyzing information with regard to all patients which support the conclusion of increased risks for persons with diabetes. For example, the CDC, which publishes peer reviewed studies, and advises the government on matters of public health, reported that the risk of death for those with diabetes is 7%, a number much higher than the general population. (<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html>).

13. These risks make it especially critical that persons with type 2 diabetes to have access to the best resources to keep the glucose levels close to normal, observe strict social distancing

and maintain cleanliness, including frequent hand-washing, use of sanitizer, and the use of personal protection equipment such as masks when held in settings where they are exposed to other individuals. Wearing plastic gloves at times of potential contact with surfaces exposed to the virus is also critical.

14. The risk of complications from COVID-19 is substantially increased for those with a history of poor blood glucose control, regardless of the type of diabetes, because the immune system is compromised and individuals will not be able to fight off any type of infection, including COVID-19. Patients with poor control are also more likely to have already developed complications from their diabetes such as eye, kidney, heart and nerve disease. Having these underlying medical conditions make them more vulnerable to the serious consequences from COVID-19, including death. Death due to COVID-19 infection is more likely for those with diabetes be-

cause viral infection makes them more susceptible to pneumonia, kidney failure and diabetic ketoacidosis.

15. Persons at risk for type 2 diabetes, especially those not receiving annual blood tests from a physician, commonly go undiagnosed for years. During this time, their blood glucose management is poor because no effort is made to manage a disease that can be asymptomatic in the early stages, and has not been diagnosed, let alone treated. Many such persons are only diagnosed once they've had dangerous blood glucose levels for so long that they are already suffering consequences and complications from poor blood glucose management. It is not uncommon that a patient may have type 2 diabetes for 5 to 10 years without knowing it if not tested properly.

16. Persons entering the correctional system who already have a history of poor blood glucose management, meaning he-

moglobin a1c levels in excess of 8% over time, enter the system with increased vulnerability to COVID-19.

17. There are very few persons with type 2 diabetes who have no additional underlying medical conditions. The vast majority are overweight, which is inherent for individuals with type 2 diabetes, have high blood pressure, abnormal cholesterol levels, and underlying heart disease, or overt heart disease. Also the vast majority of persons with type 2 diabetes are older, another important risk factor for bad COVID-19 outcomes.

18. In summary, virtually all persons with type 2 diabetes, regardless of the date of diagnosis, are especially vulnerable to both contracting COVID-19, and suffering the severe consequences of COVID-19 if they are infected, with rare exception.

Signed and sworn to under the pains and penalties of perjury this 19<sup>th</sup> day of April 2020.

/s/ Steven Edelman, M.D.

A handwritten signature in black ink, appearing to read 'SE', is written over a faint, light gray background watermark that contains the alphanumeric string 'a151dc3994b'.

Apr 19, 2020

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